

STATE OF CONNECTICUT
DEPARTMENT OF ENVIRONMENTAL PROTECTION
Hazardous Waste MANIFEST SECTION, State Office Building, Hartford, CT 06106



Please print or type: (Form designed for use on elite (12-pitch) typewriter.)

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. I.A.D.O.O.O.8.1.9.1.1.0		Manifest Document No. 004.1		2. Page 1 of 1		Information in the shaded areas is not required by Federal law, but may be required by State law.					
3. Generator's Name and Mailing Address SQUARE D COMPANY 3700 SIXTH STREET, S.W. CEDAR RAPIDS, IOWA 52404						A. State Manifest Document Number CT A 0073821							
4. Generator's Phone (319) 365-4631						B. State Gen. ID							
5. Transporter 1 Company Name FIW, INC.						C. State Tran. ID 0015							
6. US EPA ID Number ILD039616677						D. Tran. Phone 815-239-2377							
7. Transporter 2 Company Name INDIAN HEAD Truckline						E. State Tran. ID PRR.3034 MN							
8. US EPA ID Number MND.O.O.6.96338						F. Tran. Phone 612-633-2661							
9. Designated Facility Name and Site Address HANDY & HARMON C/O ACR 1770 KINGS HIGHWAY FAIRFIELD, CONNECTICUT 06430						G. State Facility's ID							
10. US EPA ID Number CTD018656819						H. Facility's Phone							
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)						12. Containers		13. Total Quantity		14. Unit Wt/Vol		15. Waste No.	
a. SPENT SULFURIC ACID SOLUTION CORROSIVE MATERIAL (SILVER SOLUTION) UN1830						No. 004 Type D.M.		00.22.0		GL		D-002	
b.													
c.													
d.													
J. Additional Description for Materials Listed Above						K. Handling Codes for Waste Listed Above							
a. DANGER 1 CORROSIVE						a. TO4							
b. STRONG OXIDIZER						b. PRECIOUS METALS RECLAMATION							
c. CAUSES SEVERE BURNS													
d. CONTACT WITH OTHER MATERIAL MAY CAUSE FIRE.													
15. Special Handling Instructions and Additional Information I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable.													
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations, and all applicable State laws and regulations.										Date			
Printed/Typed Name RICHARD R KELLY					Signature <i>Richard R Kelly</i>					Month Day Year 0.12.986			
17. Transporter 1 Acknowledgement of Receipt of Materials										Date			
Printed/Typed Name NEAL DEAN					Signature <i>Neal Dean</i>					Month Day Year 01.29.86			
18. Transporter 2 Acknowledgement of Receipt of Materials										Date			
Printed/Typed Name EDWARD Wschola					Signature <i>Edward Wschola</i>					Month Day Year 0.20.38.6			
19. Discrepancy Indication Space SECT D: SAME, "H. 203-259-8321, K. TO4 PRECIOUS METALS RECLAMATION B-SAME", SECT. 14-G RECD WITHOUT WASTE MINIMIZATION CERTIFICATION													
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.										Date			
Printed/Typed Name JOSEPH GIBBONS					Signature <i>Joseph Gibbons</i>					Month Day Year 02.04.86			

COPY 2: GENERATOR STATE - Mailed by TSDP

CT A 0073821

IN THE EVENT OF A SPILL, CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD: 1-800-424-8802. FOR SPILLS WITHIN CONNECTICUT, CONTACT CT DEP - OIL AND CHEMICAL SPILLS AT (203) 566-3338.

INSTRUCTIONS FOR COMPLETING THE CONNECTICUT UNIFORM HAZARDOUS WASTE MANIFEST

IMPORTANT: READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. ALL 8 COPIES MUST BE TOTALLY LEGIBLE.

GENERAL INFORMATION

The Hazardous Waste Manifest is designed to track waste from the point of generation to final disposal ("cradle to grave"). In order to accomplish this goal, it is essential that all items on the manifest be completed correctly. Incomplete, incorrect, or illegible manifests are violations of the law, and could subject you to civil or criminal liabilities as specified in Connecticut Hazardous Waste Management Regulations.

The Connecticut manifest contains 8 copies. **ALL COPIES MUST BE LEGIBLE!** (Illegible manifests submitted to the State will be returned to Generator for proper completion.) This form is designed for use on a 12 pitch (elite) typewriter. A firm ball point pen may also be used only if you press down HARD. The eight copies must be filed with the appropriate parties as they are completed.

COPY DISTRIBUTION is as follows:

- COPY 1: DESTINATION STATE-Mailed by TSDF:** This original stays with the shipment from generation to completion by the TSDF. When the manifest is completed, the TSDF must mail this copy to the State where his facility is located.
- COPY 2: GENERATOR STATE-Mailed by TSDF:** When the TSDF has completed his section of the manifest, he mails this copy to the State where the waste was generated.
- COPY 3: GENERATOR COMPLETED COPY:** When the TSDF has completed his section of the manifest, he mails this copy back to the Generator of the waste, who must retain it on-site for his records.
- COPY 4: TSDF COPY-Retained by TSDF:** When the TSDF has completed his portion of the manifest, he keeps this copy for his records.
- COPY 5: TRANSPORTER 1-Retained by Transporter:** When the transporter has completed his section of the manifest, and transfers the waste to the TSDF, he keeps this copy for his records.
- NOTE: If a CONTINUING TRANSPORTER is used,** the Generator is responsible for supplying him with a legible photocopy of the manifest, which must contain signatures where required.
- COPY 6: DESTINATION STATE-Mailed by Generator:** When the Generator has completed his section of the manifest and transfers his waste to the transporter, he mails this copy to the State where the designated facility (TSDF) is located.
- COPY 7: GENERATOR STATE Mailed by the Generator:** When the Generator has completed his section of the manifest and transfers his waste to the transporter, he mails this copy to the State where the waste was generated.
- COPY 8: GENERATOR-Retained by Generator:** When the Generator has completed his section of the manifest and transfers his waste to the transporter, he keeps this copy for his records.

GENERATOR SECTION

- Item 1: GENERATORS US EPA ID NO-MANIFEST DOCUMENT NO** — Enter the U.S. EPA 12 digit identification number. (Small-Quantity Generators who have not obtained an EPA ID number should enter the words "SQG" here.) Then enter a UNIQUE 5 digit number you assign to this manifest. Use of serially increasing numbers (eg. 00001, 00002, etc.) is recommended.
- Item 2: PAGE 1 of** — Enter the total number of pages used to complete this manifest, i.e., the first form plus the number of Continuation Sheets if any. Any CT DEP approved Continuation Sheet may be used provided distribution and completion meet Connecticut manifest requirements.
- *Item 3: STATE MANIFEST DOCUMENT NUMBER** — Number preprinted by CT except on the Continuation Sheets. Enter this number on each of the Continuation Sheets attached to or part of a manifest under Item 1.
- Item 4: GENERATOR'S NAME & MAILING ADDRESS** — Enter the name (as notified to EPA) & mailing address of the Generator. This address should be the location that will manage the returned manifest forms. (However, a manifest copy must be kept at the actual site.)
- Item 5: GENERATOR'S PHONE NUMBER** — Enter a telephone number with area code where an authorized agent of the Generator can be reached in an emergency.
- *Item 6: STATE GEN ID** — The State Generator ID is the STREET ADDRESS of the Generator's pick-up location. If the mailing address and the street address are the same, enter "same" in this block.
- Item 7: TRANSPORTER 1 COMPANY NAME** — Enter the company name (as notified to EPA) of the first transporter who will transport the waste.
- Item 8: US EPA ID NUMBER** — Enter the U.S. EPA 12 digit identification number of the first transporter identified in Item 5.
- *Item 9: STATE TRAN ID** — Enter the State of registration & the license plate number of the waste-carrying portion of the vehicle being used to make the pick-up.
- NOTE: ALL HAZARDOUS WASTE TRANSPORTERS OPERATING IN CONNECTICUT MUST HAVE A VALID CONNECTICUT TRANSPORTER'S PERMIT.**
- Item 10: TRANSPORTER'S PHONE** — Enter a telephone number with area code where an authorized agent of the transporter can be reached.
- Item 11: TRANSPORTER 2 COMPANY NAME** — If applicable, enter the company name (as notified to EPA) of the 2nd transporter who will transport the waste. If more than 2 transporters will be used, use a CT Manifest Continuation Sheet & list the transporters in the order they will be transporting the waste.
- Item 12: US EPA ID NUMBER** — If applicable, enter the U.S. EPA 12 digit identification number of the 2nd transporter identified in Item 7.
- *Item 13: STATE TRAN ID** — If applicable, enter the 2nd transporter's State of registration & license plate number of the waste-carrying portion of the vehicle being used to make the pick-up.
- Item 14: TRANSPORTER'S PHONE** — If applicable, enter the 2nd transporter's telephone number with area code where an authorized agent of the transporter can be reached.
- Item 15: DESIGNATED FACILITY NAME & SITE ADDRESS** — Enter the company name (as notified to EPA) of the TSDF designated to receive the waste listed on this manifest. The address must be the site address, which may differ from the mailing address.
- Item 16: US EPA ID NUMBER** — Enter the U.S. EPA 12 digit identification number of the designated TSDF identified in Item 9.
- *Item 17: STATE FACILITY'S ID** — Enter the MAILING ADDRESS of the TSDF. This address should be the location that will manage the returned manifest. If the site address (listed in Item 15) & the mailing address are the same, enter "same".
- Item 18: FACILITY PHONE** — Enter a telephone number with area code for the TSDF designated to receive the waste listed on the manifest.
- Item 19: US DOT DESCRIPTION** — All of the following information must be entered: The correct US DOT (Dept. of Transportation) name for the waste as identified in 49 CFR Parts 171-177 (usually found in Column 2 of Section 172.101), the assigned DOT Hazard Class (usually in Column 3) & the 4 digit UN/NA ID number (Column 3A). (Example: Waste acetone, flammable liquid, UN 1090.) US DOT requires the word "waste" before or in the shipping name for all hazardous waste.
- Item 20: CONTAINERS (NO. & TYPE)** — Enter the number of containers for each waste and the appropriate abbreviations from TABLE 1 (below) for the type of container used.

TABLE 1 — CONTAINER TYPE

DM = Metal drums, barrels, kegs	TP = Tanks, portable	CM = Metal boxes, cartons, cases (incl. roll-offs)
DW = Wooden drums, barrels, kegs	TT = Cargo Tanks (tank trucks)	CW = Wooden boxes, cartons, cases
DF = Fiberboard or plastic drums, barrels, kegs	TC = Tank Cars	CF = Fiber or plastic boxes, cartons, cases
CY = Cylinders	DT = Dump trucks	BA = Burlap, cloth, paper/plastic bags

Item 21: TOTAL QUANTITY — Enter the total quantity of waste described on each line, relative to the units used in Item 14.

Item 22: UNIT (Wt./Vol.) — Enter the appropriate abbreviation from Table II (below) for the unit of measure used in determining the total quantity of waste described on each line. Do NOT use fractions.

TABLE II — UNITS OF MEASURE

G = Gallons (liquids only)	L = Liter (liquids only)	Y = Cubic Yards
P = Pounds	K = Kilograms	N = Cubic Meters
T = Tons (2000 lb.)	M = Metric Tons (1000 kg.)	

- *Item 1: WASTE NO.** — Enter the 4 digit EPA hazardous waste number as it appears in 40 CFR Part 261, Subparts C & D. (Note: if a non-RCRA, STATE REGULATED waste is being manifested, enter the State waste code here. If both the Destination & Generator States have assigned codes, use the Destination State code. If there is no EPA/State code, enter "None". Do NOT leave blank.
- NOTE:** Place an asterisk (*) after the waste no. for waste which generators believe qualifies for exemption under Generator tax act C.G.S. 222-451.
- *Item 2: ADDITIONAL DESCRIPTIONS FOR MATERIALS LISTED ABOVE** — Enter description (chemical names, constituent percentages, etc.) for any waste which has a US DOT shipping name ending in N.O.S. If you entered a STATE DESIGNATED WASTE CODE in Item 1, provide description, or note any applicable EPA Hazard Codes (ignitable(I), Corrosive(C), Reactive(R), EP Toxic(E), Acutely Hazardous(H), Toxic(T). Enter specific gravity if other than 1.0. Any additional desired waste description may be entered here.
- Item 15: SPECIAL HANDLING INSTRUCTIONS & ADDITIONAL INFORMATION** — Use this space to indicate special transportation, treatment, storage or disposal or Bill of Lading information. If an alternate facility is designated, note it here. For INTERNATIONAL SHIPMENTS, The Generator must enter here the point of departure from the U.S. through which the waste must travel before entering a foreign country. (City & State). This space may also be used for emergency response numbers, and other information the Generator wishes to include about the shipment.
- *ITEM 16: HANDLING CODES** — TSDF Completes this section — see "Designated Facility Section". (below)
- Item 16: GENERATORS CERTIFICATION** — The Generator must read, sign (by hand) & date the certification (with date of transfer to transporter.) If a mode other than highway is used, the word "highway" should be lined out & the appropriate mode (rail, water, or air) inserted in the space below. If another mode in addition to the highway mode is used, enter the appropriate mode (e.g. "and rail") in the space below.

TRANSPORTER SECTION

- Item 17: TRANSPORTER 1 ACKNOWLEDGEMENT** — Print or type the name of the person accepting the waste on behalf of the 1st transporter. That person must acknowledge acceptance of the waste described on the manifest by signing & entering the date of receipt.
- Item 18: TRANSPORTER 2 ACKNOWLEDGEMENT** — If applicable, follow instructions for Item 17 for Transporter 2.

DESIGNATED FACILITY (TSDF) SECTION

- Item 19: HANDLING CODES (TSDF COMPLETES)** — Enter the ULTIMATE handling method employed at the designated facility for each waste listed in Item 11. Only the following process codes may be used (Same as Biennial Report form codes):

TABLE III — PROCESS CODES

STORAGE:	S01 (Containers)	S02 (Tank)	S03 (Waste Pile)	S04 (Surface Impoundment)	S05 (Other — specify)
TREATMENT:	T01 (Tank)	T02 (Surface Imp.)	T03 (Incinerator)	T04 (Other — specify)	D83 (Surface Impoundment)
DISPOSAL:	D79 (Injection well)	D80 (Landfill)	D81 (Land Application)	D82 (Ocean Disposal)	D84 (Other — specify)

- Item 19: DISCREPANCY INDICATION SPACE** — The authorized representative of the designated facility's owner or operator must note in this space any significant discrepancy between the waste described on the manifest & the waste actually received at the facility. Any rejected materials should be listed here, along with an indication of the disposition of the rejected materials. Any applicable Discrepancy or Exception reporting requirements must also be complied with. Federal & State regulations vary.
- Item 20: FACILITY OWNER OR OPERATOR CERTIFICATION** — Print or type the name of the person accepting the waste on behalf of the owner or operator of the designated TSDF. That person must acknowledge acceptance of the waste described on the manifest by signing (by hand) & entering the date of receipt. The signature of the authorized TSDF agent indicates acceptance (except for items specified in Item 19) & agreement with the statements on this manifest.

*NOTE: FOR INTERSTATE SHIPMENTS (between different states) YOU MAY BE REQUIRED TO COMPLY WITH THE MANIFESTING REQUIREMENTS OF BOTH THE DESTINATION & GENERATOR STATES REGARDING THE COMPLETION OF SPECIFIC INFORMATION INCLUDED IN LETTERED ITEMS A-K. You may wish to contact State agencies for more information on this subject.

REMINDER: ALL 8 COPIES OF THIS FORM MUST BE TOTALLY LEGIBLE.